

EXHIBIT E

Rats were prepared as described for Exhibit D. A silk thread was passed around the left anterior descending coronary artery (LAD). The LAD was occluded for 30 min then reopened. Peptide administration was performed as described for Exhibit D. After 24 hours, the animal was anesthetized and then sacrificed. The heart was excised and a catheter inserted into the aorta for injection of TTC, to differentiate necrotic from non-necrotic myocardium, followed by Evans blue dye to stain the normally perfused region blue. The left ventricle was then cut into transverse sections and photographed.

The slides of each transverse section were scanned into a computer. Each slide was imaged using NIH IMAGE software (<http://rsb.info.nih.gov/nih-image>). The size of the blue (perfused), red (viable), and pale (infarct) areas were determined by pixels of each color. The amount of the infarct as a percentage of the area at risk (i.e., the non-perfused area) was calculated and expressed in the table as the infarct size. The data from each slide were added and the mean calculated per heart. The sample size indicates the number of separate experiments, each of which is the mean of four different sections. All measurements were made by an individual who was unaware (blind) of the intervention received by the animal.

The size or amount of infarct, as a percent of the area at risk, was as follows.

Table 1. Effect of VDV peptides on infarct size following LAD occlusion.

	Control	Peptide (5 mg)		
		SVDVEY	TVDVEY	YVDVEY
Infarct size (\pmSEM)	21.0 \pm 8.0 N=4	10.9 \pm 6.7 N=3	10.4 N=1	10.0 \pm 5.7 N=3
Reduction in infarct size	--	48.0%	50.5%	52.4%